

**Testimony of the National Alliance on Mental Illness (NAMI) Connecticut
Before the Public Health Committee
March 4, 2015**

**IN OPPOSITION TO/COMMENTS
HB 5444 AN ACT CONCERNING THE TREATMENT OF PERSONS WITH PSYCHIATRIC
DISABILITIES.**

Good afternoon Senator Gerratana, Representative Ritter and members of the Public Health Committee. My name is Daniela Giordano and I am the Public Policy Director with the National Alliance on Mental Illness (NAMI) Connecticut. NAMI Connecticut is the state affiliate of NAMI, the nation's largest grassroots mental health organization dedicated to building better lives for all those affected by mental health conditions. NAMI Connecticut offers support groups, educational programs, and advocacy for improved services, more humane treatment and an end to stigma and economic and social discrimination. We represent individuals who live with mental health conditions and parents and family members of individuals living with mental health conditions. I am writing to you today on behalf of NAMI Connecticut to oppose proposed bill *HB 5444 An Act Concerning the Treatment of Persons with Psychiatric Disabilities*.

The stated purpose of HB 5444 is "to enhance the care and treatment of persons with psychiatric Disabilities." However, the actual bill language proposes to change individuals' privacy rights, which are protected by the patient's bill of rights and may violate and interfere with these rights.

The first part of the bill proposes to "allow certain health care providers to obtain medical records for the treatment of patients in facilities for persons with psychiatric disabilities." It is not clear which health care providers could access information and what kind of medical records would be shared. Under the federal Health Insurance Portability and Accountability Act (HIPAA), if the disclosure is between health professionals and is related to a person's treatment, that disclosure can already be made. If this is the kind of medical records sharing intended by this proposal, then it doesn't add anything that existing law doesn't already cover. If, however, the disclosure of protected health information would go beyond this specific purpose by already permitted health professionals, then this would be problematic and cause strong concern for us.

The second part of the bill proposes "to allow persons involved in formulating the patient's discharge plan to communicate with the patient's family members concerning the plan." We understand a lot of family members' wishes to be included in their loved one's care, caring for their health and wellbeing. And ideally, all individuals who live with a mental health condition should have family support, but not all do. In some families, the behavior of other family members has been a source of trauma. In others, relationships have deteriorated over time. This can be true for all of us, whether we are living with an identified mental health condition, other health conditions or not. Regardless of this situation, the individual who is receiving treatment should have the choice as to who receives information about his/her care and that choice should be respected.

Health care providers could also ensure they use engagement skills with individuals in their facilities, including when asking if the individual is willing to give consent to share certain protected health information with family members, and explain that he/she can restrict which information is shared and that this permission can be removed at any time. That way, an individual receiving care and treatment is truly informed of the choices he/she has and the individual's choice and privacy stays protected. This kind of truly informed interaction would less likely be done through a change in law, but rather through education and training for all involved, health professionals, individuals receiving care and interested family members. On the other side, if an individual receiving care is unable to give consent to release medical records and that is proven if a petition for conservatorship is filed, then this is a way for a family member who is appointed as the conservator to access such medical records. Connecticut already has a system in place for this and therefore does not need additional proposals to change this and potentially violate a person's privacy and protections.

Thank you for your time and attention. Please let me know if I can answer any questions for you.

Respectfully,

Daniela Giordano, MSW
Public Policy Director
NAMI Connecticut